acceptance auto insurance

P.O. Box 23410 Nashville, TN 37202

## **DECLARATIONS PAGE**

Policy Number: CSGA 000302584 Account Number:

Effective Date: 04/23/2018 11:58 AM Policy Period: 04/23/2018 to 10/23/2018

Customer Service: 1-800-321-0899 Se Habla Espanol 1-888-922-7767
This policy expires at 12:01 am CST on the policy end date listed above.

Insured CARRIE JONES 2707 WINDCLIFF DRIVE MARIETTA, GA 30067 Agent: ACCEPTANCE INSURANCE-WEBSITE P.O. BOX 23410 NASHVILLE TN 37202 Phone: 800-3210899 Agent#: 009-99-9999 04/23/18

Date:

VEHICLE INFORMATION  The auto(s) or trailer(s) described in this policy is/are principally garaged at the above address unless otherwise stated.										
VEH	MODEL							Deductible		
NO	YEAR	MAKE	MODEL	VIN	Symbol	Class	Points	Comp/Collision		
001	2015	KIA	SOUL	KNDJN2A28F7232265	83	FS29		\$1000 / \$1000		

LIENHOLDER INFORMATION							
VEH NO	INTEREST NAME	INTEREST ADDRESS	INTEREST PHONE NUMBE				
001	Unknown	00000-0000					

# \*If purchased, the comprehensive/collision deductible selected for each vehicle is listed in the "Vehicle Information" section.

COVERACE	LINAITE OF L	IA DILITY	DEDITO: E*	VEH 1	VEH 2	VEH 3	VEH 4	VEH 5	VEH 6
COVERAGE	LIMITS OF L	ABILITY	DEDUCTIBLE*	PREM	PREM	PREM	PREM	PREM	PREM
Bodily Injury	25,000 ea	ch person							
1 2 1	50,000 ea	ch accident		432.00					
Property Damage	25,000 ea	ch accident		354.00					
Uninsured Mtr BI	25,000 ea	ch person		85.00					
	50,000 ea	ch accident							
Uninsured Mtr PD	25,000 ea	ch accident	250	60.00					
Comprehensive	1,000 de	ductible each acc	ident	92.00					
Collision	de	ductible each acc	cident	406.00					
AL PREMIUM PER VEH				1429.00					

#### Envelope ID: B772B779-C027-4528-A416-78EE56BDE59C Case 18-56794-jwc Doc 5 Filed 04/23/18 Entered 04/23/18 14:43:00 Desc Main Document Page 2 of 2

## DRIVER INFORMATION

DVR NO	DRIVER NAME	DOB	SEX	M/S	DL STATE	DL STATUS	STATUS
1	CARRIE JONES	08/28/1989	F	S	GA		Rated

## **PREMIUM SUMMARY**

 TOTAL PREMIUM:
 \$ 1,429.00
 MGA FEE:
 \$31.50

 POLICY FEE:
 \$ TOTAL CHARGES:
 \$1,460.50

## **ENDORSEMENT CHANGES**

ENDORSEMENT CHANGES EFFECTIVE DATE

The above endorsement(s) has (increased/decreased) your premium by

## **ENDORSMENTS MADE PART OF THIS POLICY AT TIME OF ISSUE**

FAGA 100 02.17 PERSONAL AUTO POLICY

GAS-121

LOSS PAYABLE CLAUSE

Note: if you fail to receive any of the above policy forms or endorsements or for additional copies, please contact: Acceptance Auto Insurance, P.O Box 150769, Nashville, TN 37215

<sup>\*</sup> A FEE OF \$8.00 IS CHARGED FOR EACH INSTALLMENT.